

MEDICARE CHANGE OF OWNERSHIP

Medicare providers undergoing change of ownerships are required to complete a number of CMS forms. These forms are to be completed by the new owners in order to continue receiving reimbursement for Medicare claims.

Below are the names and websites for each Medicare form to be completed and submitted.

- Medicare Enrollment Application (CMS-855A)
<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms855a.pdf>
- Skilled Nursing Facility Application for Medicare and Medicaid (CMS-671)
<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/CMS671.pdf>
- Health Insurance Benefits Agreement (CMS 1561) *(Two signed copies)*
<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms1561.pdf>
- Assurance of Compliance (HHS-690)
<http://www.hhs.gov/ocr/civilrights/clearance/hhs690.pdf>
- Office of Civil Rights packet
<http://www.hhs.gov/ocr/civilrights/clearance/pregantchecklist.pdf>
- Electronic Funds Transfer Form (CMS-588)
<https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/downloads/cms588.pdf>

In addition to the forms listed above the following information will also need to be provided:

- Patient Transfer Agreement *(signed by **both parties**)*
- Operation Transfer Agreement, lease agreement or purchase agreement
- Cover letter indicating effective date of change of ownership

Send all Medicare forms, patient transfer agreement, operation transfer agreement, lease agreement or purchase agreement and cover letter to: Tina Lewis, Senior Administrative Assistant, Survey and Certification Commission, 612 S. Kansas Ave. Topeka, Kansas 66603. If you have any questions, you can contact her at (785) 296-1260 or by email at tina.lewis@kdads.ks.gov.

The CMS-855A Medicare Application is to be sent to your Medicare Administrative Contract (MAC).